

## ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
<b>FEE DETERMINATION</b>			
O.I.P.E. CLASSIFIER	R.	J/C 873	1/10/01
FORMALITY REVIEW			02-07-01
RESPONSE FORMALITY REVIEW			

## INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
 = ..... Allowed      I ..... Interference  
 — (Through numeral) ... Canceled      A ..... Appeal  
 ÷ ..... Restricted      O ..... Objected

Claim	Final	Original	Date
1	3	Original	5/12/02
2		✓	5/14/02
3	✓	✓	
4	✓	✓	
5	✓	✓	
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If more than 150 claims or 10 actions  
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